10/10/2007

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

MICHAEL W. DOBBINS CLERK, U.S. DISTRICT COURT

|  | Eddie<br>Stanley   | opher Grooms,<br>Brantley,<br>Hunter,<br>Ia Henderson, and<br>Love  | IN FORMA PAUPERIS APPLICATION<br>AND<br>FINANCIAL AFFIDAVIT  |   |  |  |  |
|--|--|---|--|---|--|--|--|
|  | Plain<br>v.  | City of Chicago Police Officers<br>David Tencza, #9203,<br>Michelle Wantuck, #19973,<br>Sergeant John Lee, #909, and<br>The City of Chicago   | CASE NUMBI   | CR 07C 6176   |  |  |  |
|  | Def  | endant(s)   | JUDGE  | Andersen  |  |  |  |
|  |  |   | Magistrate Judge Valdez  |   |  |  |  |
| I,<br>(otherwither declaration continuous) | de the add Uylon  er  out full p  are that I  omplain  wing que  Are y  I.D. # | ditional information. Please PRINT:  da Henderson  in the above-entitled repayment of fees, or □ in suppor am unable to pay the costs of the typetition/motion/appeal. In supprestions under penalty of perjury:  tou currently incarcerated? | , declare that I am the I case. This affidavit const of my motion for appoints proceedings, and that I ort of this petition/application. | refer to each such question number and be possible petitioner movant titutes my application to proceed timent of counsel, or both. I also am entitled to the relief sought in eation/motion/appeal, I answer the (If "No," go to Question 2)  Monthly amount: |  |  |  |
| 2.   | Are y<br>Mont  | ou currently employed? hly salary or wages: \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\)   | Yes □No  | Hosp  |  |  |  |
|  | a.   | If the answer is "No": Date of last employment: Monthly salary or wages: Name and address of last employment  |  |   |  |  |  |
|  | b.   | Are you married? Spouse's monthly salary or way Name and address of employer:   |  |   |  |  |  |
| 3.   | or any   | one else living at the same resid   | ence received more than  | n the past twelve months have you \$200 from any of the following boxes that apply in each category.  |  |  |  |
|  | a.<br>Amou   | Salary or wages   | ceived by  | □Yes □No  |  |  |  |

## 

|   | Business, □ profes                        |                                     |                                  |   | □Yes   | <b>V</b>   |  |  |  |  |  |  |  |
|---|---|-------------------------------------|----------------------------------|---|--|--|--|--|--|--|--|--|--|
| c. □ R<br>Amount  | Rent payments, □                          | interest or □ div<br>Received       | idends<br>by                     |   | □Yes   | Þ  |  |  |  |  |  |  |  |
| d. □ F  | Pensions, ☐ socia pensation, ☐ uner       | l security, □ an<br>mployment, □ w  | nuities, □ lif<br>elfare, □ alim | e insurance<br>nony or mair               | , □ disability,                              | wo   |  |  |  |  |  |  |  |
| Amount C  | 200                                       | Received                            | 1 by <b>8</b>                    | Child                                     | □Yes<br>PEY                                  |  |  |  |  |  |  |  |  |
|   | lifts or □ inherita                       |                                     | by                               |   | □Yes   | V  |  |  |  |  |  |  |  |
| f. $\square A$ :  | ny other sources (                        | state source:                       |                                  | )   | □Yes   |  |  |  |  |  |  |  |  |
| Amount  |   | Received                            | by                               |   |  |  |  |  |  |  |  |  |  |
| Do von or   | anyone else living                        | a at the come                       | : 1                              | 41  | 200: 1                                       |  |  |  |  |  |  |  |  |
| savinge acc   | anyone eise nving                         | g at the same res                   | incline have i                   | nore than 3.                              | 200 in cash or                               | cneck  |  |  |  |  |  |  |  |
| In whose n  | counts?<br>ame held:                      | L 1 ¢5                              | Deletionsh                       | rotarai<br>in to vou:                     | nount;                                       |  |  |  |  |  |  |  |  |
| in whose in   | anie neta.                                |                                     | _ Kelationsii                    | ip to you                                 |  |  |  |  |  |  |  |  |  |
| Do you or anyone else living at the same residence own any stocks, bonds, securities or |   |                                     |                                  |   |  |  |  |  |  |  |  |  |  |
| financial in  | struments?                                |                                     |                                  | ·   | $\Box V_{es}$                                | Г  |  |  |  |  |  |  |  |
| Property:   | 1 11                                      |                                     | Current Va                       | lue:                                      |  |  |  |  |  |  |  |  |  |
| In whose na   | ıme held:                                 |                                     | Relationsh                       | ip to you:                                |  |  |  |  |  |  |  |  |  |
| Do you or   | anyone else livir                         | ng at the same r                    | esidence owr                     | i anv real e                              | state (houses                                | anart  |  |  |  |  |  |  |  |
|   | ıms, cooperatives                         |                                     |                                  |   |  | upani  |  |  |  |  |  |  |  |
| Address of 1  | property:                                 | ,                                   | , , .                            |   |  | •  |  |  |  |  |  |  |  |
| Type of pro   | property:<br>perty:<br>ame held:          |                                     | Current valu                     | ie:                                       | ***  |  |  |  |  |  |  |  |  |
| In whose na   | ame held:                                 |                                     | Relationship                     | to vou:                                   |  |  |  |  |  |  |  |  |  |
|   | monthly mortgage                          | or loan payment                     | s:                               | , <u></u>                                 |  |  |  |  |  |  |  |  |  |
| Amount of i   | rson making paym                          | ents:                               |                                  |   |  |  |  |  |  |  |  |  |  |
| Amountori   |   |                                     |                                  |   |  | -  |  |  |  |  |  |  |  |
| Name of per   | anvona alca livina                        | r at the came real                  | danaa arrm a                     | nı, nutamak                               | laa baasa suu:                               | Do you or anyone else living at the same residence own any automobiles, boats, trailers, mother or other items of personal property with a current market value of more than \$1000? |  |  |  |  |  |  |  |
| Name of per   | anyone else living                        | g at the same resi                  | dence own a                      | ny automob                                | iles, boats, trai                            | lers, i  |  |  |  |  |  |  |  |
| Name of per   | anyone else living<br>ther items of perso | g at the same resional property wit | dence own a                      | ny automob<br>arket value                 | of more than \$                              | 10003  |  |  |  |  |  |  |  |
| Name of per<br>Do you or a<br>homes or of   | ther items of perso                       | onal property wit                   | h a current m                    | ny automob<br>arket value                 | iles, boats, trai<br>of more than \$<br>□Yes | 10000  |  |  |  |  |  |  |  |
| Name of per Do you or a homes or of   | ther items of perso                       | g at the same resional property wit | h a current m                    | ny automob<br>arket value                 | of more than \$                              | 10003  |  |  |  |  |  |  |  |
| Name of per Do you or a homes or of Property: Current vali                              | ther items of perso                       | onal property wit                   | h a current m                    | arket value                               | of more than \$<br>□Yes                      | 10000  |  |  |  |  |  |  |  |
| Name of per Do you or a homes or of   | ther items of perso                       | onal property wit                   | h a current m                    | ny automob<br>arket value<br>hip to you:_ | of more than \$<br>□Yes                      | 10003  |  |  |  |  |  |  |  |
| Amount of I Name of per Do you or a homes or of Property: Current vali In whose na      | ther items of perso                       | endent on you for                   | Relations                        | hip to you:                               | of more than \$ □Yes                         | 10003  |  |  |  |  |  |  |  |

| I declare under penalty of perjury that the above in to 28 U.S.C. § 1915(e)(2)(A), the court shall dism allegation of poverty is untrue.  Date:  | aformation is true and correct. I uniss this case at any time if the consistence of App Signature of App (Print Name) | nderstand that pursuant purt determines that my licant |  |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|--|--|
| NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own accountprepared by each institution where you have been in custody during that six-month periodand you must also have the Certificate below completed by an authorized officer at each institution. |   |  |  |  |  |  |  |  |  |  |
| CERTIFICATE (Incarcerated applicants only) (To be completed by the institution of incarceration)   |   |  |  |  |  |  |  |  |  |  |
| I certify that the applicant named herein,   | , I.D.#   | , has the sum of                                       |  |  |  |  |  |  |  |  |
| \$ on account to his/her credit at (r  | name of institution)  | <u> </u>   |  |  |  |  |  |  |  |  |
| further certify that the applicant has the following securities to his/her credit: I further   |   |  |  |  |  |  |  |  |  |  |
| certify that during the past six months the applican   | nt's average monthly deposit wa   | s \$   |  |  |  |  |  |  |  |  |
| (Add all deposits from all sources and then divide   | by number of months).   |  |  |  |  |  |  |  |  |  |
| DATE   | SIGNATURE OF AUTHORIZ   | ED OFFICER   |  |  |  |  |  |  |  |  |

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(Print name)